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mber. Docket Number (Optiona				
RETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)			UTEXAS-0001-D02	
	In re Application of Kristof CHWALISZ			
	Application Number 10/043,232		Filed January 14, 2002	
		TON DATES AF		
	IMPLANTATION RATES AFTER IN VITRO FERTILIZATION, AND TREATMENT OF INFERTILITY AND EARLY PREGNANCY LOSS WITH A NITRIC OXIDE DONOR OR SUBSTRATE ALONE OR IN COMBINATION WITH PROGESTERONE, AND A METHOD FOR CONTRACEPTION WITH NITRIC OXIDE INHIBITORS IN COMBINATION WITH For ANTIPROGESTINS OR OTHER AGENTS			
	Group Art Unit 1617	Examiner Gregory W. Mitc	chell	
This is a request under the provisio response in the above identified ap		i) to extend the pe	eriod for filing a	
The requested extension and appropriate non-small-entity fee are as follows (check time period desired):				
☑ One month (37 CFR 1.17(a)(1))		\$ <u>120.00</u>		
☐ Two months (37 CFI)	Two months (37 CFR 1.17(a)(2))		\$	
☐ Three months (37 CFR 1.17(a)(3)) \$				
Four months (37 CFR 1.17(a)(4))			\$	
Five months (37 CF				
Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee amount shown above is reduced by one-half, and the resulting fee is: \$ A check in the amount of the fee is enclosed.				
Payment by credit card. For	orm PTO-2038 is attac	ched.		
The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>13-3402</u> .				
I have enclosed a duplicate copy of this sheet.				
I am the ☐ applicant/inventor.				
assignee of record of the entire interest. See 37 CFR 3.71				
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).				
☑ attorney or agent of record.				
attorney or agent under	attorney or agent under 37 CFR 1.34(a).			
Registration number if acting under 37 CFR 1.34(a).				
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
August 22, 2005				
Date		1 15	Signature	
00000078 10043232		Csaha Hent	er, Reg. No. 50,908	
120.00 OP			or printed name	
NOTE: Signatures of all the inventors or assignee forms if more than one signature is required, see		erest or their represent	ative(s) are required. Submit multiple	

Burden Hour Statement: This form is estimated to take 0.1 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

forms are submitted.